

VT Health Care Innovation Project Health Information Exchange Work Group Meeting Minutes

Pending Work Group Approval

Date of meeting: Wednesday, February 18; 9:00-11:00 am, EXE - 4th Floor Conf Room, Pavilion Building, 109 State Street, Montpelier

	Discussion	Next Steps
Agenda Item		
1. Welcome and Introductions	Brian Otley called the meeting to order at 9:00 am. A roll call attendance was taken and a quorum was present.	
	The agenda was updated to include section 5a- a presentation on the ACO Gateway Population Health project.	
2. Approval of January 21 st minutes	Nancy Marinelli moved to approve the January 2015 minutes, Kaili Kuiper seconded. A vote in the form of an exception was taken and the motion passed unanimously.	
3. Brief Review of Year 2 Work Plan	Larry Sandage gave a brief overview of the Year 2 work plan. The HIE work group leadership team has worked to revise the plan to make it more of an operational document. The revised work plan will be distributed to the group within the next few weeks to HIE work group participants and content oriented feedback is welcome. The work plan will be reviewed in depth during the March meeting.	
4. Review of Vermont	Steve Maier presented the Vermont Information Technology Project Plan (VHITP).	Steve Maier will send a link to the
Information Technology Project	Mosaica Partners is a consultant on this project and representative Laura Kolkman introduced herself to the group.	group for the ONC interoperability
Plan	The group discussed the following: - Changes to past plans compared to the future plan with the understanding that this plan was originally	plan.

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	 meant to be a broader vision. The new plan is a change of initial focus in order to comply with the statutory obligations in order to achieve goals within a shorter timeframe. The VHCIP HIE work group work plan is a subset of the VHITP. Concerns around the final completion date for the plan, considering the current plan is already five years old. The current goal is to have a more operational plan alongside the master plan. The GMCB will have final approval over the plan (see slide 12). Laura Kolkman continued the presentation to discuss the stakeholder engagement process and plan development. ACOs should be included as key stakeholders. Patient populations will also be represented. Focus on specific providers and not representative groups. Privacy standards will be considered but may not necessarily be revised in the new plan. Planning for beyond the three year time period: strategically the State is looking into the future but this plan is focused on goals that are actionable. 	Work group participants that would like to be considered for an interview should email Steve Maier: steve.maier@state. vt.us. The link to the new website will be sent gr the group on Friday Feb 20th after the VHITP
5. Review of the Telehealth Project	Karen Bell, lead contractor for JBS International presented an overview for Vermont's Telehealth Strategy (attachment 3). The group discussed the following:	kickoff meeting. JBS is looking for recommendations from the work group on Telehealth
	 Survey will include the following: what technology is used, the frequency, to what degree, barriers, and evaluation measures. If you've identified barriers around reimbursement or licensure, will this inhibit pilot programs? JBS will make recommendations to overcome the barriers. Would telehealth be used as a means to connect patients who are suffering with the same illnesses? JBS will look at ways this is working in different parts of the country and they will report on this and solicit feedback from the work group and Telehealth Steering Committee. 	Steering Committee participants as well as informants for current telehealth practice throughout the State.
	 Virtual health- patients can receive diagnostic and clinical advice regardless to their setting via text and secure online video connections. Research will include legal barriers to this type of care. Vermont's law does require that the patient needs to be in a clinical setting but part of this program is to pilot other options. People with disabilities would greatly benefit from access to telehealth but may have limited abilities to 	Work group participants should email Simone Rueschemeyer with recommendations

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	utilize the tools in which participate. JBS will include this topic as part of their research. - Confirming whether independent software has integration with electronic health records.	for the above: Simone@vermontca repartners.org.
5a. SIM ACO Status Update	Sandy McDowell presented an update on the ACO Gateway Population project (slides were not distributed prior to the meeting but will be sent out to the group via email). - Medicare measures are being sent to NNEACC who are performing the analytics.	The presentation will be emailed to the work group.
	 ACOs are collecting the data and reporting performance based on a sample of attributed patients for the Medicare, Medicaid and Commercial SSP's. Regarding the event notification system: no limitation on the amount of patients you want to follow. This is set up to notify clinicians individually. Pilot sites will be decided by the ACOs through a volunteer process. Providers only need to identify the patient and their medical record number in order to participate- no other electronic health record system is necessary. After a thorough review process VITL has selected Medicity to operate the notification system. Regarding the ACTT project: VITL is not currently working on the Universal Transfer Protocol project as phase 1 of the project is development of the protocol. 	
6. Public Comment	No further comments were offered.	
7. Next Steps, Wrap Up and Future Meeting Schedule	Next Meeting: Wednesday, March 25, 2015 1:00 pm – 3:00 pm, DVHA Large Conference Room, 312 Hurricane Lane, Williston	